U.S Department of Labor Office of Labor-Management Standards Washington, DC 20218

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Managemer and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

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For Official Day Only	**
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1 File Number U 073Z	2. Fiscal Year Covered From:
111010111111111111111111111111111111111	
	[1] / [3] / [202] / Through: [2] / [3] / [202]
3 Name and address of person filing	4 Name file number and address of labor organization.
New C	None (man (man))
Name Bryan M Johnson	Name IBEW 44 1070
/	Labor Organization File Number 457875
P O Box, Bldg. Room No., ii eny	P O Box, Building and Room Number II any
Street 77 2 Port 107	Street 770 50 - 6-0 m - 57
1760 TATION ST.	Street 779 SO. Front ST
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State M. 7 1992 ZIP Code + 4 498049 4	State Michael ZIP Code +4 7/9045
	J State 77) 771, 211, 31, 31, 31, 31, 31, 31, 31, 31, 31,
5. Position in labor organization. 3451 Ness M.	ANAger -
Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests	
jexcept as specified in the exc	dustons set forth in the instructions).
A. Held an interest in, engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
	-7.a. Nature of Interest, Transaction, or Income.
6 Name and address of Employer (including trade name II any).	
Name]
Trade Manage Harmy	,
Trade Name II any	-
P O Box Bldg Room No., if any	The state of the s
The same of the sa	7.b. Amount.
Street	
City	
State ZIP Code + 4	J]
Signature	
15. Signature and verification. The undersigned declares, under penalty of Penury and other applicable penalties of the law that all of the information	
submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief true correct, and complete (See the section on penalties in the instructions.)	
Undersigned's information and control of the section on penalises in the instructions)	

Date

Form LM-30 (2003)

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Telephone Number